




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
600 Washington Street  
Boston, MA 02111  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)



Eligibility Operations Memo 04-09  
July 1, 2004

TO: MassHealth Eligibility Operations Staff

FROM: Russ Kulp, Deputy Director, MassHealth Operations 

RE: **Expansion of MassHealth Essential Coverage to Certain Adult Non-Citizens: Aliens with Special Status**

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### **Introduction**

In August 2003, due to state budget cuts, MassHealth benefits became no longer available at state cost to adult immigrants who, because of their immigration status, were not eligible to receive full federally funded benefits. Persons affected by this change are described as “aliens with special status” (AWSS). These are persons permanently residing under color of law (PRUCOL) or certain qualified aliens subject to the five-year bar. As a result, adult AWSS members either became eligible only for MassHealth Limited coverage or lost MassHealth coverage altogether.

The Massachusetts legislature has enacted into law a change in the eligibility requirements of MassHealth Essential. This change authorizes MassHealth, for a time-limited period, to expand the existing MassHealth Essential coverage type to provide or restore MassHealth coverage to adult AWSS aged 19 or older who meet certain requirements. Since the inception of MassHealth Essential coverage under Health Care Reform in October 2003, and until the present change in law, MassHealth Essential coverage has been unavailable to:

- AWSS, due to their immigration status, and
- all persons aged 65 or older, regardless of their immigration status.

This action expands current MassHealth Essential to cover adult AWSS who are both disabled and long-term unemployed (Health Care Reform population) and AWSS who are aged 65 or older (Traditional population).

**Please Note:** This current expansion of MassHealth Essential coverage for AWSS does not change or limit in any way the eligibility requirements or the MassHealth benefits that are provided for citizens and non-citizens

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**Introduction**  
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who are eligible under the original MassHealth Essential program as described in 130 CMR 505.007(A) through (D). Eligibility Operations Memo 03-12, issued October 2003, "MassHealth Essential: MassHealth Benefits to the Long-Term Unemployed," details the original MassHealth Essential program under Health Care Reform.

This memo:

- identifies the affected population;
  - explains the funding and enrollment limitations, eligibility requirements, and benefits provided under the MassHealth Essential expansion;
  - addresses operational issues;
  - describes the systems impact for MA21, PACES, MMIS and REVS;
  - includes samples of certain MassHealth notices mailed to the affected population; and
  - provides "at-a-glance" charts for easy reference about program, systems, and noticing information for the MassHealth Essential expansion.
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**Aliens Who Are Affected**

The population affected by this change in MassHealth Essential regulations is described in 130 CMR 504.002(D) and 518.002(D).

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**Requirements and Benefits**

MassHealth Essential benefits for AWSS are effective only from June 1, 2004, through September 30, 2004, unless the legislature authorizes an extension. MassHealth Essential coverage for AWSS is provided with a MassHealth Limited component that is not afforded to persons under the original Essential program described in Eligibility Operations Memo 03-12. Covered services under the expanded Essential coverage are provided in accordance with 130 CMR 450.105(I) under Essential and 130 CMR 450.105(G) under Limited.

The enrollment cap, funding restrictions, enrollment freeze, and waiting list procedures, described in Eligibility Operations Memo 03-12 under the original MassHealth Essential program, remain in effect under Health Care Reform, and now also apply under Traditional. Central Office staff will also manage and perform waiting-list functions for the Traditional population through PACES. Eligibility staff and potential members will be notified if and when it becomes necessary to impose a freeze on MassHealth Essential enrollment.

The requirements and benefits of the expanded Essential coverage are described in this memo separately for the Health Care Reform and Traditional populations.

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**Requirements and  
Benefits**  
(cont.)

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**Health Care Reform Population**

**Eligibility Requirements.** The main difference in eligibility requirements between the original Essential coverage and the expanded Essential coverage for AWSS is that AWSS must also meet the disability requirement.

- Persons must meet the AWSS immigration requirements at 130 CMR 504.002(D).
- AWSS aged 19 through 64 must meet all of the eligibility requirements for the existing MassHealth Essential program at 130 CMR 505.007(A) through (D), including those of long-term unemployment and income.
- Persons must also meet MassHealth disability requirements at 130 CMR 505.002(F)(2)(a). Potential disability is **not acceptable**.
- The existing MassHealth Essential requirement to enroll with a Primary Care Clinician (PCC) applies to persons without other health insurance.
- The coverage date for MassHealth Essential for AWSS is determined in the same manner as under the existing MassHealth Essential rules, except that coverage can be no earlier than June 1, 2004.
- The coverage date for the MassHealth Limited component is determined in accordance with the rules for Limited at 130 CMR 505.008, and may be before June 1, 2004.

**Benefits.**

- MassHealth Essential benefits for AWSS are available (a) for persons without other health insurance, through Essential Purchase of Medical Benefits (premiums do not apply, though existing Essential copay requirements apply), and (b) for persons with other health insurance, through Essential Premium Assistance, in the same manner and with the same requirements as under the existing MassHealth Essential program. A “wrap” benefit is also available to members under Essential Premium Assistance for MassHealth Essential covered services that are not covered by the member’s own health insurance.
- A MassHealth card is provided, even for MassHealth Essential Premium Assistance members.
- Persons eligible for MassHealth Essential, including Essential Premium Assistance members, are also provided MassHealth Limited coverage. Only MassHealth Limited coverage is provided in the following circumstances:
  - during any period when the start date of coverage is before June 1, 2004;
  - for the 10-day retro period, and (for members without other health insurance) until enrollment with a PCC;

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**Requirements and  
Benefits**  
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- for the 10-day retro period and (for members with other health insurance) until Essential Premium Assistance eligibility begins, (MassHealth Limited is also available as a “wrap” benefit for MassHealth Limited covered services that are not covered by the member’s own health insurance.); and
- while a potential MassHealth Essential member is on a waiting list, if an enrollment freeze has been imposed.

**Traditional Population**

**Eligibility Requirements.** Eligibility requirements for persons aged 65 or older are similar to those under the former MassHealth Basic for Seniors coverage type that was eliminated in August of 2003 (that is, Standard eligibility requirements must be met, except for immigration status). Coverage is provided on a fee-for-service basis, with no managed care requirement.

- Persons must meet the AWSS immigration requirements at 130 CMR 518.002(D).
- Persons must be aged 65 or older.
- Income must be at or below 100% of the federal poverty level.
- Assets must be at or below \$2,000 for an individual, and \$3,000 for a married couple living together.
- Asset reduction rules at 130 CMR 520.004, and income deductible rules starting at 130 CMR 520.028 apply.
- Retro eligibility rules apply to MassHealth Essential, except not prior to June 1, 2004, or if the applicant is processed from a waiting list.

**Benefits.**

- Benefits are available on a fee-for-service basis.
- The coverage date for MassHealth Essential may not be before June 1, 2004.
- Persons eligible for MassHealth Essential are also provided MassHealth Limited coverage concurrently. (This dual coverage under Traditional is primarily for claims purposes, and in most cases the Limited coverage will be invisible to the member.)
  - Only MassHealth Limited may be provided during any period when the start date of coverage is before June 1, 2004.
  - Only MassHealth Limited may be provided while a potential MassHealth Essential member is on a waiting list, if an enrollment freeze has been imposed.
- A MassHealth card is provided.

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**Automatic  
Upgrades from  
Limited to Essential  
for Certain AWSS**

On or about May 17, 2004, MassHealth issued one-time, system-generated population-specific advance notices (for Health Care Reform and Traditional) announcing an “automatic” upgrade to MassHealth Essential to approximately 300 Health Care Reform AWSS MassHealth Limited members and to approximately 2,400 Traditional AWSS MassHealth Limited members. The notices were sent to each active member on file on MA21 and PACES on the date of issuance, who met the new MassHealth Essential expansion requirements. The notices:

- provide an explanation of the changes in the availability of MassHealth benefits to certain non-citizens;
- include a Questions for Immigrants Form (QFI) (in English only) allowing MassHealth Limited members to submit documentation of any immigration changes for possible upgrade to Standard; and
- include a UNIV-6 multilingual notice.

Samples of the two advance notices are attached to this memo. These notices were issued in both English and Spanish.

QFI forms and immigration documentation that are returned to MassHealth as a result of this mailing must be reviewed and processed as soon as possible for potential upgrades in coverage. Additionally, because Central Office is tracking all QFI forms that are received as a result of this mailing, staff must forward processed QFI forms to the MassHealth Operations Policy and Implementation Unit at Central Office.

Upon implementation of these new MassHealth Essential regulations on June 1, 2004, two notices were issued. A sample of each is attached to this memo. Both of these notices are appealable.

- MA21 automatically determined eligibility for affected Health Care Reform MassHealth Limited members, and issued a notice of upgrade to Essential with Limited. Managed care enrollment information was also sent to these individuals.
- PACES “redirected” all category (CAT) 05, Action Reason (AR) 08 and 09 AWSS MassHealth Limited cases to provide MassHealth Essential coverage, and issued a one-time notice of upgrade to MassHealth Essential.

Any AWSS Limited members who qualify for the Essential upgrade, who are coded as pregnant and receive prenatal services under Healthy Start, will lose Healthy Start coverage upon PCC enrollment, because Essential benefits include prenatal care. The Healthy Start Program is responsible for notifying all Healthy Start members of changes in their eligibility for the Healthy Start Program.

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**Viewing Certain  
PACES Notices  
through MA21**

MA21 notices may be viewed through MA21 in the usual manner. The PACES advance notice and the notice of upgrade to Essential may be viewed through the MA21 noticing system by selecting the “Additional MA21 Options” function at the main MA21 logon screen.

- On the “Additional MA21 Functions” screen, at “Option,” enter “NO” for notices.
  - On the “Notices Administration Menu” screen, at “Code,” enter “05” for “Display PACES Notices by Case SSN and CAT.”
  - When the “Enter Case SSN and Category Code” window appears, enter the case SSN and a “5” for CAT.
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**Information Inserts**

Because of the possible temporary nature of this MassHealth Essential regulation change, and to preserve the limited funding available for this benefit, MassHealth information materials have intentionally not been updated to reflect the MassHealth Essential expansion. However, an insert will be enclosed with the MBR and MHA packages and with the freestanding Health Care Reform member booklets and *MassHealth and You* guides. The inserts:

- refer certain non-citizens to the MassHealth Customer Service Center for information on additional MassHealth benefits that may be available; and
  - refer persons without prescription drug benefits under MassHealth to Prescription Advantage through Elder Affairs.
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**Systems Impact**

MA21 and PACES (including noticing), MMIS, and REVS systems have been updated to process the expanded MassHealth Essential coverage.

**Under Health Care Reform**

MA21 Benefit (BEN) Codes and Noticing:

- LE: Notices identify coverage as “Essential with Limited” (for AWSS without other health insurance).
  - LP: Notices identify coverage as “Essential Premium Assistance with Limited” (for AWSS with other health insurance).
  - Noticing: On each of the notices for LE and LP, there are *two* references to start dates of coverage. These notices identify a specific case-sensitive start date for the Limited benefit portion only. The Essential benefit portion refers to PCC enrollment for those without other health insurance (LE) or to TPL requirements for those with other health insurance (LP), as in the notices for the existing MassHealth Essential program.
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**Systems Impact**  
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MMIS Aid Category – for eligibility information inquiries (In the event that staff may find it necessary to view MMIS recipient data screens for eligibility inquiries, the following information is provided.)

There are two new MMIS aid category codes identifying the Essential expansion coverage under Health Care Reform for AWSS members. These MMIS codes also appear under CAT (category) on the MA21 “Display Determination” screen:

- AR: Essential with Limited *upon* PCC enrollment (Both Essential and Limited benefits are provided.)
- AS: Essential Premium Assistance with Limited (“Wrap” benefits also may be provided.)

If the start date is before June 1, 2004, only Limited benefits will be provided during any period before June 1, 2004.

**Under Traditional**

PACES Benefit Codes and Noticing:

- CAT 05, AR (08) and (09) – No change in PACES coding—PRUCOL (08); five-year barred aliens (09).
- PACES has been reprogrammed to generate Essential coverage as of June 1, 2004.
- Noticing: PACES notices identify coverage as “Essential.”

If the start date is before June 1, 2004, only MassHealth Limited benefits will be provided during the period before June 1, 2004.

MMIS Aid Category – for eligibility information inquiries

CAT and ARs are the same on MMIS for eligibility inquiries as they are on PACES. **Please Note:** Staff should be aware upon viewing “recipient eligibility” information for CAT 05, AR 08 or 09, that the start date will identify the coverage type, because there is no coverage type coding distinction readily visible when looking at the data.

- If the **start date** of coverage is **on or after June 1, 2004**, the benefit is **Essential**.
- If the **start date** is **before June 1, 2004**, the benefit is **only Limited** during any period before June 1, 2004.

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**EAEDC Impact**

All persons, regardless of immigration status, who receive EAEDC cash assistance from the Department of Transitional Assistance are automatically eligible for EAEDC MassHealth benefits under 130 CMR 450.106. However, the EAEDC recipient's immigration status does affect eligibility for other MassHealth coverage as follows.

**Under Health Care Reform rules:**

- Reminder: EAEDC recipients aged 19 through 64 who are citizens or are qualified aliens not subject to the five-year bar receive MassHealth Basic coverage upon managed care enrollment.
- EAEDC recipients aged 19 through 64 who are AWSS are not eligible for MassHealth Basic due to their immigration status. These EAEDC recipients must meet the requirements of the expanded MassHealth Essential coverage type, including long-term unemployment and disability requirements, to be eligible for MassHealth Essential coverage.

**Under Traditional rules:**

- Reminder: EAEDC recipients aged 65 or older who are citizens or are qualified aliens not subject to the five-year bar receive MassHealth Standard coverage.
- EAEDC recipients aged 65 or older who are AWSS are not eligible for MassHealth Standard due to their immigration status. These EAEDC recipients, however, are *automatically* eligible for the MassHealth Essential expanded benefit because they meet the age requirement.

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**Regulation Changes**

MassHealth member regulations in Volumes I and II have been amended to reflect the expansion of MassHealth Essential under Health Care Reform and to add the new coverage type under Traditional. MassHealth Essential for the Traditional population is located at 130 CMR 519.013.

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**MassHealth Card**

AWSS Limited members who were upgraded to MassHealth Essential as of June 1, 2004, may continue to use their MassHealth card. As of June 1, 2004, the card will provide Essential coverage as well as Limited.

A MassHealth card is issued to all newly eligible AWSS Essential members, including those eligible for the expanded Essential Premium Assistance.

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**Attachments**

The following items are attached to this memo.

- Advance notice for Health Care Reform members
- Upgrade notice for Health Care Reform members
- Advance notice for Traditional members
- Upgrade notice for Traditional members
- AWSS Essential Eligibility Requirements chart
- AWSS Essential Systems Codes chart

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**Questions**

Questions about this memo should be directed to the MassHealth Policy Hotline through your office designee.

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REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Tel: 800-322-1448  
TTY: 888-665-9997  
Date: 05/17/2004  
SSN: 999-99-9999  
MEC: 550 Type: AWSM-ADV MA21  
NUM: 9654012

550/AWSM-ADV  
FRED SMITH  
21 FREDDY RD  
ROCKPORT MA 01966-0000

This is an important message about MassHealth

Dear FRED SMITH

Massachusetts legislation has been enacted that will allow MassHealth to provide expanded medical benefits to certain adult non-citizens who have an immigration status and/or US entry date that do not allow certain benefits to be paid for the federal government. MassHealth will provide these expanded benefits through a program called MASSHEALTH ESSENTIAL. On June 1, 2004 these benefits will become available to certain non-citizens:

- \* whose monthly income (before taxes and deductions) is at or below 100% of the federal poverty level (FPL) (\$776 for one person and \$1,041, if you are married);
- \* who are adults under age 65;
- \* who meet the MassHealth disability guidelines; and
- \* who are currently receiving MassHealth Limited benefits.

As a current MassHealth Limited member, we think you meet these rules and are eligible for this MassHealth benefit package that offers greater coverage than you now have. If you previously received MassHealth Basic, MassHealth Family Assistance or MassHealth CommonHealth benefits, MassHealth Essential will allow you to get most of the benefits you used to get under those programs. MassHealth Essential members can receive coverage for medical services listed under MassHealth Essential in the MassHealth Member Booklet and under MassHealth regulations at 130 CMR 450.105(I). (For more information about MassHealth Essential medical benefits, you can call MassHealth Customer Service at 1-800-841-2900.)

You do not have to do anything if you want MassHealth to automatically upgrade your MassHealth Limited coverage to enable you to enroll in MassHealth Essential as of June 1, 2004. We will send you a notice on or after June 1, 2004 that tells you when your MassHealth Essential benefits will begin. That notice will also explain your appeal rights.

Since the legislation only gives MassHealth a certain amount of money to spend on this benefit, MassHealth will stop enrollment in MassHealth Essential as soon as 36,000 people are enrolled. The funding that provides for this expanded MassHealth Essential benefit is currently granted only through September 30, 2004. We will let you know about any future changes in this coverage.

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IMPORTANT NOTICE ABOUT CHOOSING A DOCTOR

After you are approved for MassHealth Essential benefits, you must choose a primary care doctor (PCC) before you can get MassHealth Essential benefits. We will send you an enrollment package so that you can choose a primary care doctor. Until you do enroll with a MassHealth PCC doctor, you will continue to get only MassHealth Limited coverage.

If you have other health insurance, we may be able to pay for all or part of your health insurance premiums.

Please Note: MassHealth members may get more coverage under MassHealth Standard or MassHealth CommonHealth if they submit proof of their different immigrant status or if they change their immigrant status. If you want MassHealth to review your immigrant status to decide if you can get MassHealth Standard or CommonHealth, fill out the enclosed MassHealth Questions for Immigrants Form (QFI). Send the filled-out MassHealth Questions for Immigrants Form and proof of your immigrant status to the MassHealth Enrollment Center listed below in this notice within 10 days. Once we get the filled-out form with the proof of your immigrant status, we will send you a notice that tells you if you are eligible for either of these programs. That notice will also explain your appeal rights (If you are not eligible for MassHealth Standard or CommonHealth and remain eligible for MassHealth Essential, you will not get another notice.) MassHealth Standard and MassHealth CommonHealth members can receive coverage for medical services listed under MassHealth regulations at 130 CMR 450.105(A) or (E). (For more information about MassHealth Standard or MassHealth CommonHealth medical benefits, you can call MassHealth Customer Service at 1-800-841-2900.)

If you have questions or need help filling out the MassHealth Questions for Immigrants Form, or need a MassHealth Member Booklet, call the MassHealth Enrollment Center at the telephone number listed below.

MASSHEALTH ENROLLMENT CENTER  
REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE, MA 02151-3675

Toll-free: 1-888-665-9993

TTY: 1-888-665-9997 for persons with partial or total hearing loss

NB (05/04)

REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Tel: (800) 322-1448  
TTY: (888) 665-9997  
Fax: (781) 485-3400

550/UPGR  
FRED SMITH  
21 FREDDY RD  
ROCKPORT MA 01966-0000

Date: 06/01/2004

Notice: 9749721

SSN: 999-99-9999

Dear FRED SMITH

The Division of Medical Assistance has decided that the following MassHealth members can get more medical services under a different coverage type. This is because of a change in your family's circumstances.

Name SSN	Benefit Effective Date	Other	Explanation
SMITH, FRED 999-99-9999	06/01/2004	*2	Your coverage will change to Essential with Limited.

\*2 Your Essential coverage will begin when you choose a doctor. Your Limit coverage will begin on the effective date listed above.

Your current MassHealth coverage will stop on the effective date listed above.

MassHealth Essential coverage lets you get the medical services described in the MassHealth booklet under MassHealth Essential. However, before you can get services you must choose a doctor to manage your health care needs. If you have not done this yet, you will soon get a package in the mail that explains your choices and tells you how to sign up. The sooner you choose a doctor, the soon you will be able to get services. Call the Customer Service Center at 1-800-841-2900 as soon as you get that package. They can help you choose the doctor who is best for you.

Please note: Your current MassHealth coverage will stop on the effective date listed above. If you were getting your care under this coverage through a health plan (such as Fallon, Neighborhood Health Plan, Boston Medical Center HealthNet Plan, or Network Health), you cannot get care from that plan any longer. You must now choose a primary care doctor instead. You cannot use your MassHealth card until you choose a doctor. If you need help choosing a primary care doctor please call the Customer Service Center at 1-800-841-2900.

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MassHealth Limited coverage lets members get care for the medical services described in the MassHealth booklet under MassHealth Limited. This includes treatment for cancer that is considered to be emergency care. MassHealth Limited also covers emergency care for all other conditions and pays for labor and delivery.

MassHealth Essential benefits are authorized and funded by the Massachusetts state legislature. Current funding lasts through September 30, 2004. If funding is not extended, your benefits will end on this date. The Division will send you a notice before this happens and will also notify you if there are other changes in MassHealth eligibility rules that may affect you.

Call the phone number at the top of this notice if you have any questions about this notice. If you don't have a copy of the MassHealth booklet, please call to request one. It has important information about MassHealth coverage and rules.

For information about appealing our decisions, see the other side of this notice.

REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Tel: 800-322-1448  
TTY: 888-665-9997  
Date: 05/17/2004  
SSN: 999-99-9999  
MEC: 550 Type: AWSP-ADV PACES  
NUM: 9654012

550/AWSP-ADV  
JOE SMITH  
33 JOES LANE  
ROCKPORT MA 01966-0000

This is an important message about MassHealth

Dear JOE SMITH

Massachusetts legislation has been enacted that will allow MassHealth to provide expanded medical benefits to certain adult non-citizens who have an immigration status and/or US entry date that do not allow certain benefits to be paid for the federal government. MassHealth will provide these expanded benefits through a program called MASSHEALTH ESSENTIAL. On June 1, 2004 these benefits will become available to certain non-citizens:

- \* who are aged 65 or older;
- \* whose monthly income is at or below \$776 for one person (\$1,041, if you are married), or who can meet a deductible;
- \* whose assets are at or below \$2,000 for one person (\$3,000, if you are married); and
- \* who are currently receiving MassHealth Limited benefits.

As a current MassHealth Limited member, we think you meet these rules and are eligible for this MassHealth benefit package that offers greater coverage than you now have. If you previously received MassHealth Basic benefits, MassHealth Essential will allow you to get most of the benefits you used to get under Basic. MassHealth Essential members can receive coverage for medical services listed under MassHealth regulations at 130 CMR 450.105(I). (For more information about MassHealth Essential medical benefits, you can call MassHealth Customer Service at 1-800-841-2900.)

You do not have to do anything if you want MassHealth to automatically upgrade your MassHealth Limited coverage to MassHealth Essential as of June 1, 2004. We will send you a notice on or after June 1, 2004 that tells you when your MassHealth Essential benefits will begin. That notice will also explain your appeal rights.

Since the legislation only gives MassHealth a certain amount of money to spend on this benefit, MassHealth will stop enrollment in MassHealth Essential as soon as 36,000 people are enrolled. The funding that provides for MassHealth Essential is currently granted only through September 30, 2004. We will let you know about any future changes in this coverage.

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Please Note: MassHealth members may get more coverage under MassHealth Standard if they submit proof of their different immigrant status or if they change the immigrant status. If you want MassHealth to review your immigrant status to decide if you can get MassHealth Standard, fill out the enclosed MassHealth Questions for Immigrants Form (QFI). Send the filled-out MassHealth Questions for Immigrants Form and proof of your immigrant status to the MassHealth Enrollment Center listed below in this notice within 10 days. Once we get the filled-out form with the proof of your immigrant status, we will send you a notice that tells you if you are eligible for MassHealth Standard. That notice will also explain your appeal rights. (If you are not eligible for MassHealth Standard and remain eligible for MassHealth Essential, you will not get another notice.) MassHealth Standard members can receive coverage for medical services listed under MassHealth regulations at 130 CMR 450.105(A). (For more information about MassHealth Standard medical benefits, you can call MassHealth Customer Service at 1-800-841-2900.)

If you have questions or need help filling out the MassHealth Questions for Immigrants Form, or need a MassHealth and You guide, call the MassHealth Enrollment Center at the telephone number listed below.

MASSHEALTH ENROLLMENT CENTER  
REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Toll-free: 1-888-665-9993  
TTY: 1-888-665-9997 for persons with partial or total hearing loss

NB (05/04)



REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Date: 06/01/2004  
SSN: 999-99-9999  
MEC: 550  
NUM: 9725621  
Type: PACES AWSS-UPGR

550/AWSS-UPGR  
JOE SMITH  
33 JOES LANE  
ROCKPORT MA 01966-0000

This is an important message about MassHealth

Dear JOE SMITH

MassHealth recently sent you a notice about MassHealth Essential benefits and "Questions for Immigrants Form" (QFI). The notice explained that you are eligible for MassHealth Essential benefits because of a change in state law affecting certain non-citizens. MassHealth Essential offers greater coverage than the MassHealth Limited benefits you now have. As of June 1, 2004, you will have MassHealth Essential coverage instead of MassHealth Limited. You can still use the MassHealth card, but as of the above date it will cover more services under MassHealth Essential.

Below are some of the services that are available under MassHealth Essential. There may be some limits and special rules may apply.

- \* Inpatient hospital services
- \* Outpatient services: hospitals, clinics, doctors, limited dental
- \* Medical services: lab tests, x-rays, therapies, pharmacy, medical equipment and supplies
- \* Mental health and substance abuse services: inpatient and outpatient
- \* Emergency ambulance services

The following is a list of some of the services that are not covered under MassHealth Essential.

- \* Eye glasses and hearing aids
- \* Home health care
- \* Adult day health and adult foster care
- \* Hospice
- \* Nursing facility services
- \* Transportation (except emergency ambulance services)

MassHealth Essential members can receive coverage for medical services listed under MassHealth regulations at 130 CMR 450.105(I). For more information about MassHealth Essential medical benefits, you can call MassHealth customer service at 1-800-841-2900. This number also appears on the back of the MassHealth card

You must report any changes in your health insurance, address, income, family size, immigrant status, or other situation to your MassHealth Enrollment Center within 10 days. These changes may affect your eligibility.

The limit on countable assets is \$2,000.00 for one person and \$3,000.00 for a family of two, plus \$100.00 for each additional person.

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MassHealth Essential benefits are authorized and funded by the Massachusetts state legislature. Current funding begins June 1, 2004 and lasts through September 30, 2004. If funding is not extended, your MassHealth Essential benefits will end on this date. MassHealth will send you a notice before this happens and will also notify you if there are other changes in MassHealth eligibility rules that may affect you.

Please Note: MassHealth Essential members are not eligible for coverage under MassHealth Standard because they do not meet the eligibility rules that apply this coverage type. However, MassHealth members may get more coverage under Standard if they submit proof of their different immigrant status or if they change their immigrant status. If you have requested that MassHealth review your immigrant status for more coverage under Standard, and you have filled out and sent back the QFI form with the proof we need, we will review your eligibility. We will send you another notice only if your MassHealth coverage changes from Essential. That notice will also explain your appeal rights. (If there is no change in your MassHealth benefits because of the immigrant status information you send us, you will not receive another notice.)

Call the MassHealth Enrollment Center listed below, if you have any questions about this letter, if you want to report any changes, or if you need a "MassHealth and You" Guide.

For information about appeal rights, see the other side of this notice

MASSHEALTH ENROLLMENT CENTER  
REVERE OFFICE  
300 OCEAN AVENUE, SUITE 4000  
REVERE MA 02151-3675

Toll-free: 1-888-665-9993  
TTY: 1-888-665-9997 for persons with partial or total hearing loss

<b>AWSS Essential Eligibility Requirements</b> Essential benefits may not begin before 06/01/04. Limited benefits may begin before 06/01/04.			
Type of Individual	HCR (aged 19 through 64), no health insurance	HCR (aged 19 through 64), with health insurance	Traditional (aged 65 or older)
Income Standards	100% FPL or less	100% FPL or less	100% FPL or less
Deductible	N/A	N/A	If income is greater than 100% FPL, a six-month deductible would apply.
Disability Required?	Yes	Yes	N/A
Long-Term Unemployment Required?	Yes	Yes	N/A
Retro Coverage	Retro coverage only for Limited for 10 days before the MBR receipt date	Retro coverage only for Limited “wrap” services for 10 days before the MBR receipt date (for services that are covered by Limited, but are not covered by the member’s own health insurance)	90-day retroactive coverage applies. If the start date is before 06/01/04, only Limited would be provided until 06/01/04.
Managed Care Required?	Must enroll with a PCC. No MCO option.	N/A	N/A
Fee-for-Service Coverage?	N/A	N/A	Yes
Limited Coverage	Yes. Limited coverage is given before PCC enrollment. It is also given if the start date is before 06/01/04, or if the potential member is on a waiting list. (Limited coverage is not visible to the member when Essential benefits are being received.)	Yes, for “wrap” services only. Coverage is given before Essential Premium Assistance eligibility begins; if start date is before June 1, 2004; or if the potential member is on a waiting list.	Yes. Limited coverage is given if the start date is before 06/01/04, or if the member is on a waiting list. (Limited coverage is not visible to the member when Essential benefits are being received.)
Medical Start Date	Eligibility for Essential begins when the member enrolls with a PCC. Limited begins 10 days before the MBR receipt date.	Eligibility for Essential Premium Assistance begins the month after the member gives MassHealth his or her health insurance information. Also, Essential Premium Assistance “wrap” is given for services covered by Essential that are not covered by the member’s own health insurance. For Limited “wrap,” 10 days before the MBR receipt date.	Up to 90 days before the month the application was received. If the start date is before 06/01/04, only Limited is provided until 06/01/04.
Waiting List?	Yes. Receives only Limited coverage during waiting list period (see Medical Start date above).	Yes. Receives only Limited coverage during waiting list period (see Medical Start date above).	Yes. Only Limited is provided while on the waiting list. Essential medical start date is the date the member is processed from the waiting list.



## AWSS Essential Systems Codes

Coverage Type	MA21 Benefit Type Code	PACES Codes	MMIS Recipient Aid Category Codes	REVS Card Issued?	QAC Codes	MA21 Disability Codes
<b>Essential With Limited</b>	LE	N/A	AR – upon PCC enrollment	Yes	B-Barred P-PRUCOL	DA, MA (or BL*)
<b>Essential Premium Assistance With Limited</b>	LP	N/A	AS	Yes	B-Barred P-PRUCOL	DA, MA (or BL*)
<b>Essential (for seniors)</b>  (If start date is before 06/01/04 or while on a waiting list, coverage is automatically provided only through Limited.)	N/A	(No change)  Category 05: AR 08 = PRUCOL  AR 09 = five-year bar	(Coding that appears on MMIS is the same as coding that appears on PACES.)	Yes	N/A	N/A

\* Certificate of legal blindness from the Massachusetts Commission for the Blind required.

